#### U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Phoenix Area Indian Health Service Office of Human Resources, Two Renaissance Square 40 North Central Avenue, Suite 510, Phoenix, AZ 85004-4424

Preference in filling vacancies is given to qualified Native American Indian Candidates or Alaska Natives in accordance with the INDIAN PREFERENCE ACT, TITLE 25, US CODE, SECTION 472 & 473. In order than the above, the Indian Health Service is an Equal Opportunity Employer.

ANNOUCEMENT NUMBER: OPENING DATE: CLOSING DATE:

**WRSU-06-021-OC** 01-01-06 12-31-06

**POSITION TITLE/SERIES/GRADE:** Dental Officer, GS-680-011/12/13

STARTING SALARY: GS-11 - \$70,829.00 per annum

GS-12 - \$79,345.00 per annum GS-13 - \$89,966.00 per annum

**PROMOTION POTENTIAL:** GS-13

SUPERVISORY/MANAGERIAL: NO

**RELOCATION EXPENSES:** Will be paid in accordance with Federal Travel Regulations.

**APPOINTMENT/WORK SCHEDULE:** Permanent or Temporary (may be converted to permanent)

Full-Time, Intermittent, or Part-Time work schedule.

**AREA OF CONSIDERATION:** Government Wide

**DUTY LOCATIONS:** Dental Department, Clinical Department, Whiteriver Service Unit, Whiteriver, Arizona

(Specify preference. Position to be filled as vacancies occur.)

**JOB DESCRIPTION:** Dental Office. Examines, diagnoses, and treats commonly encountered dental diseases and health problems. Diagnoses and treats dental diseases and problems of greater than usual difficulty because of communication problems. May be required ot perform other related duties as assigned.

WHO MAY APPLY: All Sources, Federal employment status is not required. U.S. citizenship is required.

- Excepted Service Examining Plan Candidates (ESEP) Individuals entitled to Indian Preference who wish to be considered for excepted appointment in IHS, under authority of 5 CFR, Part 213, Schedule A 213.3116(B)(8).
- Merit Promotion Plan Candidates (MPP) Current permanent competitive Federal status employees, reinstatement eligible, and current IHS Indian Preference individuals and/or individuals who are eligible for excepted appointment in IHS under some other authority (e.g., handicapped authority, etc).
- PHS Commissioned Corps Officers Current active or inactive Commissioned Officers may apply.
- Veteran's Preference Preference eligible veterans who have been separated from the armed forces under honorable conditions after 3 years or more of continuous active service may apply.

Indian Preference applicants must indicate on their applications whether they are applying under the MPP, ESEP, or both. If not indicated, they will be considered under the MPP.

Qualified disabled applicants (Rehabilitation Act of 1973) and disabled veterans with 30% or more disability are encouraged to apply. Reasonable accommodations will be made for qualified applicants with disabilities, except when doing so would impose undue hardship on the Indian Health Service.

## **CONDITIONS OF EMPLOYMENT:**

1. Selectee(s) are required to be immunized against Measles and Rubella and provide documentation prior to or at the time of their start date. Special consideration may be allowed to individuals who are allergic to a component of the vaccine or are currently pregnant. Selectee must have documented immunity to Rubella and Measles.

- 2. Selectee(s) are required to complete Security questionnaire and fingerprint chart for investigative purposes under PL 101-630 Indian Child Protection and Family Violence Prevention Act. Persons, who have been arrested for or charged with a crime involving a child, or violent crime against a person, are not eligible for employment with IHS under PL 101-630.
- 3. Selectee(s) are required to complete a "Declaration of Federal Employment Optional Form 306" to determine your suitability for Federal Employment, and to certify the accuracy of all the information in your application. Persons making false statements in any part of the application may not be hired; or fired after employment starts; or may be fined.
- 4. Males born after December 31, 1959 are required to be registered with the Selective Service System in order to be eligible for employment with the Federal Government.
- 5. Selectee(s) are required to have a viable bank account at a financial institution for electronic direct deposit of salary payment.
- 6. Some service units operate under extended service hours 7 days per week.
- 7. The incumbent may be required to travel and must possess a valid driver's license.

### **QUALIFICATION REQUIREMENTS:**

Licensure Required: All applicants must be currently licenses to practice dentistry in a State, the District of Columbia, or Puerto Rico.

Education: Degree in dental surgery (D.D.S.) or dental medicine (D.M.D.) from a school approved by the Council on Dental Education, American Dental Association (ADA); or other dental school, provided the education and knowledge acquired was substantially equivalent to that of graduates from an ADA-approved school.

Applicants who meet the basic requirements qualify for GS-11.

## Additional Requirements for Grades GS-12 and Above:

Experience and/or training must be one of the following types:

- Post-licensure professional experience in the general practice of dentistry.
- Approved internship training.
- Approved residency training.
- Graduate-level study in an accredited dental school.
- Post-licensure professional experience in a specialized area of practice.
- Other advanced study or training (outside a dental school or hospital) creditable towards satisfaction of training program requirements for Board eligibility.

For specialist positions, experience and/or training must clearly establish the applicant's status as a specialist

- For GS- Two years of professional dentistry experience and/or training; or superior academic ability defined as that demonstrated by an intern, who on the basis of an evaluation of all interns who have completed training in the same hospital or in the same kind of internship program over the past 5 years, would fall into the upper half of the group.
- For GS- Three years of professional dentistry experience and/or training equivalent to at least that of a Board eligible.

  13:

**MEDICAL REQUIREMENTS**: Applicants must be able to distinguish shades of color.

\*\* Transcripts must be provided if you substitute education from experience.

**TIME IN GRADE:** Candidates must have completed at least one year of service in a position no more than one grade lower than the position to be filled. (If selected under the Excepted Service Examining Plan, such individuals may be appointed under Schedule A authority without regard to Time-In-Grade requirements.)

**LEGAL AND REGULATORY REQUIRMENTS:** Candidates must meet time-after competitive appointment, time-in-grade, and qualification requirements within 30 calendar days after the closing date of the vacancy announcement.

**METHODS OF EVALUATION:** Evaluation is made on the basis of appropriate education, experience, performance appraisals, training, self-development, outside activities and special awards. Experience related to tribal involvement and to Indian community projects will also be evaluated. Applicants will also be evaluated on the following ranking factors, i.e., Knowledge, Skills, and Abilities (KSA's)

**SUPPLEMENTAL QUESTIONNAIRE on KNOWLEDGE, SKILLS, AND ABILITIES (KSA):** On a separate sheet of paper, discuss how you performed (or have potential to develop) the particular knowledge, skill, or abilities listed below. (Failure to submit written responses as part of your application may result in an ineligible rating.)

#### KSA's for Dental Officer, GS-680-11:

- 1. Knowledge of current dental clinical practices.
- 2. Ability to develop community based plan for dental services, including preventive and restorative care.
- 3. Knowledge of current dental clinical practices.

## KSA's for Dental Officer, GS-680-12:

- 1. Knowledge of current dental clinical practices.
- 2. Ability to develop community based plan for dental services, including preventive and restorative care.
- 3. Ability apply dental public health criteria in allocation of resources.

#### KSA's for Dental Officer, GS-680-13:

- 1. Knowledge of current dental clinical practices.
- 2. Ability to develop community based plan for dental services, including preventive and restorative care.
- 3. Ability to apply dental public health criteria in allocation of resources.

## **HOW TO APPLY/REQUIRED FORMS:**

- 1. Applicants may use on the following to apply: (1) OF-612 Optional Application for Federal Employment, <u>or</u> (2) Resume (see requirements in **Attachment A**).
- 2. If claming Indian Preference, BIA 4432 "Verification of Indian Preference for Employment in BIA and IHS".
- 3. If claming Veteran's Preference, copy of DD-214 Form, and SF-15 if claiming 10 point Veteran's Preference.
- 4. Copy of latest Personnel Action (SF-50), if a current or formal employee, and/or if requesting Reinstatement Eligibility.
- 5. Copy of the most recent performance appraisal, if a current Federal employee.
- 6. Copy of current unrestricted Medical License if applicable.
- 7. Completed PL 101-630 Questionnaire (form attached)
- 8. Completed Selective Service Registration Form (form attached)
- 9. Written Responses to the Knowledge, Skills, and Abilities (KSA)
  - (OPTIONAL ~ failure to submit may result in an ineligible rating or substantially lower score).
- 10. Commissioned Corps Officer: (1) latest COER, and (2) current Billet Description, and
  - (3) BIA FORM 4432 if claiming Indian Preference.

Application and required forms must be identified by this announcement number and submitted to the address below:

ATTN: (WRSU-06-021-OC) Office of Human Resources Ms. Debbie Harvey Whiteriver Service Unit 200 West Hospital Drive Whiteriver, AZ 85941 Phoenix, AZ 85004

All submitted materials are subject to retention by this office. You should duplicate and retain copies, since requests for copies will <u>not</u> be honored. Additional information regarding Federal job opening can be obtained at <a href="www.opm.gov">www.opm.gov</a>, or at USAJOBS <a href="www.usajobs.opm.gov">www.usajobs.opm.gov</a> or check the IHS Website at <a href="www.ihs.gov">www.ihs.gov</a>. All documents are subject to the provision of the Privacy Act (PL 93-579) and become the property of Department of Health and Human Services (DHHS).

**Phone:** (928) 338-3558

(928) 338-3534

Fax:

Additional selections of candidates may be possible within 90 days from the date the certificate of eligible is issued for this announcement, for filing additional or similar positions.

| Human Resource Specialist: | (Call 928-338-3558 to contact a Human Resources Specialist.) | Date: | 01/12/2006 |  |
|----------------------------|--|-------|------------|--|
| <u> </u>                   | ——————————————————————————————————————                       |       |            |  |

#### ATTACHMENT A

<u>Resume Requirements</u> - Your resume or other application format must contain the following information to allow for qualification determination.

- Identify your application/resume by the announcement number, title and grade(s)
- Full Name (first, middle, last ~ include other names used, i.e., maiden name)
- Mailing Address
- Phone Number where you can be reached
- Email Address (if applicable)
- Social Security Number
- Country of citizenship
- Education: list high school and colleges attended, type of degree (list major) received, date of degrees conferred, and city and state of school.
- Work Experience: (include non-paid work as well as paid)
  - Job Title (if Federal employment, indicate series and grade)
  - Duties and Accomplishments
  - Employer's name and Address
  - Employer's name and phone number
  - Starting and ending dates of employment (month/year)
  - Hours of work per week
  - Salary
  - Indicate if you do <u>not</u> want us to contact your current supervisor (If not specified, it will be assumed that we may do so)
- List job related training (title, year obtained, hours of training)
- Honors or awards received
- License or certificates obtained (submit with application)
- Special accomplishments (i.e., publications, memberships, leadership and community recognition, etc)

Indicate if you do not want your current supervisor contacted for reference purposes.

#### ATTACHMENT B

- 1. You may be eligible for special selection priority consideration under the Career Transition Assistant Program (CTAP) if you are a current career or career-conditional (tenure group I or II) employee of the DHHS Agency at the GS-15 grade level or below or equivalent, and who has received a specific RIF separation notice or a Certificate of Expected Separation indication your job is surplus, or notice of removal for declining a directed reassignment or transfer of function outside the local commuting area. To qualify for special selection priority consideration under CTAP you MUST also meet the criteria shown in paragraph 3 below.
- 2. You may be eligible for special selection priority consideration under the Interagency Career Transition Assistance Program (ICTAP) if you are a current or former career-conditional (tenure group I or II) employee of any agency in the competitive service at the GS-15 grade level or below or equivalent, who has received a specific RIF separation notice or a notice of proposed removal for declining a directed reassignment or transfer of function outside the local commuting area. You may also be eligible if you were separated because of a compensable injury and your compensation has been terminated; or you retired with a disability and your disability annuity has been or is being terminated; or you were in receipt of a RIF separation notice and retired on the effective date of the RIF or under discontinued service; or you are a former Military Reserve Technician or National Guard Technician who is receiving a special disability retirement annuity from OPM. To qualify for special selection priority consideration under ICTAP you MUST also meet the criteria shown in paragraph 3 below.
- 3. To qualify for special selection priority consideration under CTAP or ICTAP for this vacancy, you <u>MUST</u> also meet <u>ALL</u> of the following:
  - (a) Have a current or last performance rating of record of at least fully successful or equivalent. A copy MUST be submitted with your application package. (Note: this requirement does not apply to candidates who are eligible due to compensable injury or disability retirement).
  - (b) Be applying for a position at or below the grade level from which you will be, or have been separated, and which does not have a greater promotion potential that the position from which you will be, or have been separated.
  - (c) Occupy or be displaced from a position in the same local commuting area of the position for which you are requesting priority consideration.
  - (d) File your application by the vacancy announcement closing date and meet all the applicable criteria. Your application MUST include ALL documents that support your claim of eligibility for priority consideration RIF separation notice, or notice of proposed removal for declining a directed reassignment or transfer of function to another commuting are; SF-50 Notification of Personnel Action, showing that they were separated as a result of RIF, or declining a transfer of function or directed reassignment to another area; official certification from an agency stating that it cannot place an individual whose injury compensation has been or is being terminated; or official notification from the Military Department or National Guard Bureau that the employee has retired under 5 USC 8337(h) Or 8456.
  - (e) Be rated "well qualified" for this position. A numerical rating of 85 is considered to be well qualified for this position.

# APPLICANT'S STATEMENT OF SELECTIVE SERVICE REGISTRATION STATUS

If you are a male born after December 31, 1959, and are at least 18 years of age, civil service employment law {5 U.S.C. 3328} requires that you must be registered with the Selective Service law, unless you meet certain exemptions under Selective Service law. If you are required to register but knowingly and willfully fail to do so, you are ineligible for employment by executive agencies of the Federal Government.

# **CERTIFICATION OF REGISTRATION STATUS**

Date signed {please use ink}

| Che               | Check one:   |  |
|-------------------|--|--|
| { }               | I certify I am registered with the Selective Service System.   |  |
| { }               | I certify I have been determined by the Selective Service to be exem Selective Service law.  | pt from the registration provisions of   |
| { }               | I certify I have not registered with the Selective Service System.   |  |
| { }               | I certify I have not reached my 18 <sup>th</sup> birthday and understand I am red  | quired by law to register at that time.  |
| NO                | ON-REGISTRANTS UNDER AGE 26  |  |
|                   | f you are under age 26 and have not registered as required, you should regist ffice if you are outside the United States.  | er promptly at a United States Post Office or consular   |
| NO                | ON-REGISTRANTS AGE 26 OR OVER  |  |
| reg<br>the<br>dec | f you were born in 1960 or later, are 26 years of age or older, and were register under Selective Service law. According, you are not eligible for applie Office of Personnel Management (OPM) that your failure to register was ecision through the agency that was considering you for employment by PPM determination together with an explanation and documentation you weither knowing nor willful. | pointment to an executive agency unless you can prove to s neither knowing nor willful. You may request an OPM returning this statement with your written request for an |
| PR                | PRIVACY ACT STATEMENT  |  |
| to j<br>Thi       | because information on your registration status is essential for determining volume provide the information requested by this statement will prevent any furthis information is subject to verification with the Selective Service System inforcement or other authorized use in implementing this law.  | rther consideration of your application for appointment.   |
| FA                | CALSE STATEMENT NOTIFICATION   |  |
|                   | A false statement may be grounds for not hiring you, or for firing you if you interest or imprisonment (Section 1001 of title 18, United States Code).   | have already begun work. Also, you may be punished by  |
| <br>Leg           | egal signature of individual {please use ink}  |  |

# ADDENDUM TO DECLARATION FOR FEDERAL EMPLOYMENT CHILD CARE & INDIAN CHILD CARE WORKER POSITIONS

(Civil Service and Commissioned Corps Applicants)

Section 231 of the Crime Control Act of 1990, Public Law 101-647, requires that employment applications for Federal Child care positions contain a question asking whether the individual has ever been arrested for or charged with a crime involving a child and for the disposition of the arrest or charge.

Section 408 of the Miscellaneous Indian Legislation, Public Law 101-630, require a criminal record check for positions in the Department of Health and Human Services that involve regular contact with or control over Indian children. The agency must ensure that persons hired for these positions have not been found guilty of or pleaded nolo contendere to violent crimes.

To ensure compliance with the above laws, the following questions are added to the Declaration for Federal Employment.

| 1)                 | Have you ever been arrested for or charged with a crime involving a child: [If "YES", provide the date, explanation of the violation, disposition of the arrest or charge, place of occurrence, and the name and address of the police department or court involved.]  |  |  |  |  |
|--------------------|--|--|--|--|--|
|                    | Yes No   |  |  |  |  |
| 2)                 | Have you ever been found guilty of, or entered a plea of nolo contendere (no contest) or guilty to, any offense under Federal, State, or tribal law involving crimes of violence, sexual assault, molestation, contact or prostitution, or crimes against children? [If "YES", provide the date, explanation of the violation, disposition of the arrest or charge, place of occurrence, and the name and address of the police department or court involved.] |  |  |  |  |
|                    | Yes No   |  |  |  |  |
| imprise<br>any cri | fy that my response to these questions is made under penalty of perjury, which is punishable by fines of up to \$2,000 or 5 years onment, or both; (2) I have received notice that a criminal check will be conducted. I understand my right to obtain a copy of iminal history report made available to the Indian Health Service and my right to challenge the accuracy and completeness of formation contained in the report                                |  |  |  |  |
| APPI 1             | ICANT'S SIGNATURE DATE   |  |  |  |  |

MUST HAVE ORIGINAL SIGNATURE AND CURRENT DATE